



CERTIFICATE OF MAILING BY FIRST CLASS MAIL

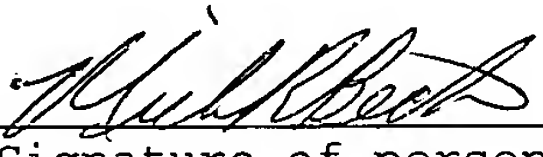
Serial No. 10/646,266  
Filing Date: 08/22/2003  
Examiner: H. Reyes  
Group Art Unit: 1625  
Docket No. 3370/2

Date of Deposit: October 12, 2004

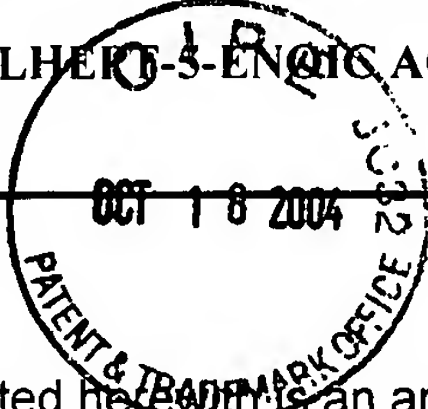
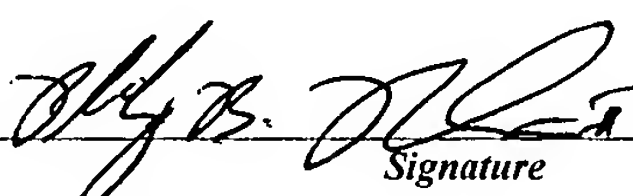

I hereby certify that these papers or fee is being deposited with the United States Post Office to Addressee service under 37 CFR 1.10 & 1.8 on the date indicated above and is addressed to the Commissioner for Patents, PO Box 1450, Alexandria, VA 22313

Amendment Transmittal Letter  
Response to Requirement for Restriction/Election  
Post Card

Michelle Becker  
(Typed or printed name of person mailing paper or fee)

  
(Signature of person mailing paper or fee)

EU 589383611 US

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. 3370/2/US	
Applicant(s): Hallinan et al						
Application No. 10/646,266	Filing Date 8/22/2003	Examiner H. Reyes	Customer No. 26648	Group Art Unit 1625	Confirmation No. 9451	
Invention: CRYSTALLINE SOLID FORM OF (2S-5Z)-2-AMINO-7-(ETHANIMIDOYLAMINO)-2-METHYLHEPT-3-ENOIC ACID						
 <b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	3 -	8 =	0 x	\$18.00	\$0.00	
INDEP. CLAIMS	3 -	5 =	0 x	\$88.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<div style="display: flex; flex-direction: column; gap: 10px;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment.</div><div><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</div><div><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</div><div><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>19-1025</b><div style="margin-left: 20px;"><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div></div><div><input type="checkbox"/> Payment by credit card. Form PTO-2038.</div></div> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p>						
<div style="text-align: center;"> _____ Philip B. Polster, II Reg. No. 43,864</div>			Dated: October 12, 2004			
CC:			<div>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on October 12, 2004 (Date) <div style="text-align: center;"> _____ Signature of Person Mailing Correspondence <b>Michelle R. Becker</b> Typed or Printed Name of Person Mailing Correspondence</div></div>			

IFW

Application Number 10/646,266  
Response to Office Action Dated 9 September 2004

Appl. No. 10/646,266  
Applicant E. Ann Hallinan  
Filed August 22, 2003  
TC/A.U. 1616  
Examiner Hector M Reyes

Confirmation No. 9451



Docket No. : 3370/2  
Customer No. : 26648

TITLE: CRYSTALLINE SOLID FORM OF (2S-5Z)-2-AMINO-7-(ETHANIMIDOYLAMINO)-2-METHYLHEPT-5-ENOIC ACID

Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

I hereby certify that this correspondence is being deposited with the United States Postal Service as "First Class Mail" in an envelope addressed to: Commissioner of Patents, P.O. Box 1450, Alexandria V.A. 22313.  
Michelle R. Becker

A handwritten signature in cursive script, appearing to read "Michelle R. Becker".

Date: OCTOBER 12, 2004

**RESPONSE TO REQUIREMENT FOR RESTRICTION/ELECTION**

Sir:

Please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 5 of this paper.

Please charge any fees in connection with the making of this amendment to deposit account number 19-1025.

A handwritten signature in cursive script, appearing to read "Philip B. Polster II".

Philip B. Polster II  
Reg. No. 43,864  
Attorney for Applicants